



JPW

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Attorney Docket Number ADI-111											
		In re Application of Seydel et al.											
		Application Serial No. 10/795,957											
		Filed: March 8, 2004											
		Group Art Unit: 3728	Examiner: Patterson, Marie D.										
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above entitled application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired)</p> <table><tr><td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>\$ 120.00</td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>\$</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>\$</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>\$</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>\$</td></tr></table> <p><input type="checkbox"/> Applicant claims small entity status under 37 CFR 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$_____.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge the required fee to Deposit Account No. 07-1700. Enclosed is a duplicate of this sheet.</p> <p><input type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account No. 07-1700.</p> <p><input checked="" type="checkbox"/> Return receipt postcard enclosed.</p> <p>I am the <input type="checkbox"/> assignee of record of the entire interest. <input type="checkbox"/> applicant. <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____</p>				<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 120.00	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 120.00												
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$												
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$												
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$												
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$												
CORRESPONDENCE ADDRESS		SIGNATURE BLOCK											
Direct all correspondence to: Patent Administrator Goodwin Procter LLP Exchange Place Boston, MA 02109 Tel. No.: (617) 570-1000 Fax No.: (617) 523-1231 Customer No. 051414		Respectfully submitted, Date: May 4, 2006 Reg. No. 42,545 Tel. No.: (617) 570-1607 Fax No.: (617) 523-1231 John V. Forcier Attorney for Applicant(s) Goodwin Procter LLP Exchange Place Boston, MA 02109											

05/10/2006 AKELECH1 00000019 10795957

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Application Serial Number	10/795,957
Filing Date	March 8, 2004
First Named Inventor	Seydel
Group Art Unit	3728
Examiner	Patterson, Marie D.
Attorney Docket No.	ADI-111

FEE CALCULATION (continued)

- ### 3. ADDITIONAL FEES

Fee Description

Fee Paid[illegible]

1. FILING/SEARCH/EXAM/SIZE FEES

Fee (\$)	Fee Description	Fee Paid
300	Utility filing fee	
500	Utility search fee	
200	Utility exam fee	
250	Utility size fee (each add'l 50 pgs. over 100)	
200	Design filing fee	
100	Design search fee	
130	Design exam fee	
250	Design size fee (each add'l 50 pgs. over 100)	

	Number Filed	Number Extra	Rate	Amount
Total Claims	- 20 = <u>0</u>		x \$ 50.00 =	
Independent Claims	- 3 = <u>0</u>		x \$200.00 =	
<input type="checkbox"/> Multiple Dependent Claim(s), if any			\$360.00 =	
			TOTAL:	
			SMALL ENTITY DISCOUNT:	
			SUBTOTAL (1)	(\$)

2. AMENDMENT CLAIM FEES

Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid
Total	- 28 =		x \$ 50.00 =	
Indep.	- 3 =		x \$200.00=	
<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$360.00=	
TOTAL:				(\$)
SMALL ENTITY DISCOUNT:				(\$)
SUBTOTAL (2)				(\$)
				0.00

SUBTOTAL (3)

(\$)
120.00

SUBTOTAL (1)	0.00
SUBTOTAL (2)	0.00
SUBTOTAL (3)	120.00

TOTAL	(\$)	120.00
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~~Respectfully submitted,~~

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